

<p>Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</p> <p>FEE TRANSMITTAL For FY 2006</p> <p><input type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27</p>		<p style="text-align: center;">Complete if Known</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Application Number</td> <td>10/560,736-Conf. #3727</td> </tr> <tr> <td>Filing Date</td> <td>December 15, 2005</td> </tr> <tr> <td>First Named Inventor</td> <td>Toshiyuki KOMORI</td> </tr> <tr> <td>Examiner Name</td> <td>Not Yet Assigned</td> </tr> <tr> <td>Art Unit</td> <td>Not Yet Assigned</td> </tr> <tr> <td>Attorney Docket No.</td> <td>0230-0232PUS1</td> </tr> </table>		Application Number	10/560,736-Conf. #3727	Filing Date	December 15, 2005	First Named Inventor	Toshiyuki KOMORI	Examiner Name	Not Yet Assigned	Art Unit	Not Yet Assigned	Attorney Docket No.	0230-0232PUS1
Application Number	10/560,736-Conf. #3727														
Filing Date	December 15, 2005														
First Named Inventor	Toshiyuki KOMORI														
Examiner Name	Not Yet Assigned														
Art Unit	Not Yet Assigned														
Attorney Docket No.	0230-0232PUS1														
<p>TOTAL AMOUNT OF PAYMENT (\$) 250.00</p>															

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>02-2448</u> Deposit Account Name: <u>Birch, Stewart, Kolasch & Birch, LLP</u>	
<p>For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)</p> <input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Small Entity		Small Entity		Small Entity		
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____
2. EXCESS CLAIM FEES							
Fee Description						Small Entity	
						Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)			Multiple Dependent Claims	
10	- 20 =	x	=			Fee (\$)	Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20							
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)				
1	- 3 =	x	=				
HP = highest number of independent claims paid for, if greater than 3							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)		
224	- 200 =	24	/50	1	(round up to a whole number) x	250.00	=
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge) _____							

SUBMITTED BY			
Signature	<i>Gerald M. Murphy, Jr.</i>	Registration No (Attorney/Agent)	28,977
Name (Print/Type)	Gerald M. Murphy, Jr.	Telephone	(703) 205-8000
		Date	March 22, 2007